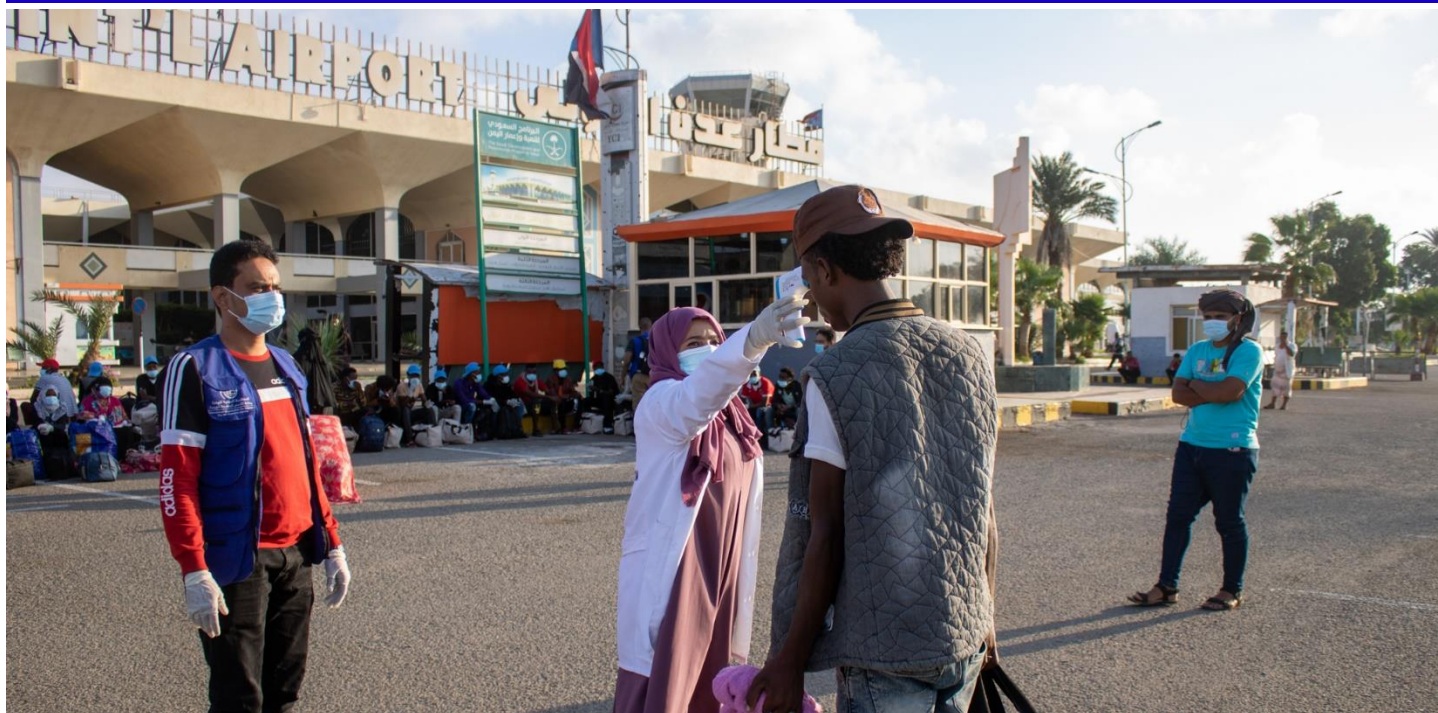




COVID-19 RESPONSE

IOM Regional Office for Middle East and North Africa
Situation Report 21 (26 February – 25 March 2021)



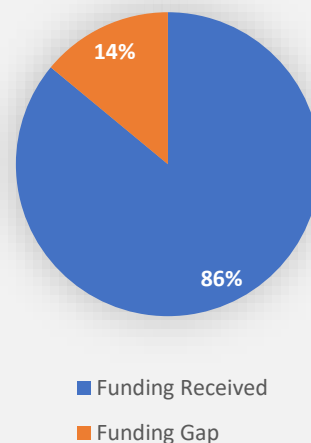
An IOM nurse checking the temperature of a migrant in Aden, Yemen ©IOM Yemen

Key Regional Updates

- As of 25 March 2021, a total of **4,613,473 COVID-19 cases** have been confirmed in the Middle East and North Africa (MENA) region, out of which **76,825 fatalities** have been reported.
- On 18 March 2021, the IOM Regional Office for the Middle East and North Africa (MENA) organized a **webinar in celebration of International Women's Day**. The event was opened by IOM Regional Director for MENA, Mrs. Carmela Godeau. Her Excellency Mrs. Nabila Makram, Minister of State for Emigration and Egyptian Expatriates Affairs was the Keynote Speaker provided **updates on the recent development that have been taken by Egypt to achieve gender equality**. The meeting was followed by an interactive discussion between panellists: Ms. Sheikha Bibi Nasser Al Sabah, Goodwill Ambassador for the UN Migration in Kuwait and GCC countries, Ms. Sarah Badr, Regional Focal Point for the MENA of the Major Group for Children and Youth, Ms. Taban Shores, Founder of The Lotus Flower and Ms. Ghada Hammouda, Chief Sustainability and Marketing Officer at Qalaa Holdings. The **discussion evolved around good practices and challenges regarding the inclusion of women in key sectors of the economy**. The meeting was concluded by IOM Chief of Mission for Egypt, Mr. Laurent de Boeck. The webinar occurs in a context where the COVID-19 pandemic has exacerbated existing gendered barriers globally.
- An IOM delegation comprising representative from IOM Regional Offices for the East and Horn of Africa, MENA, Southern Africa and West and Central Africa attended the **17th Dubai International Humanitarian Assistance and Development (DIHAD) Conference and Exhibition**. Under the patronage of His Highness Sheikh Mohammed bin Rashid Al Maktoum, Vice President, Prime Minister of United Arab Emirates, Ruler of Dubai, DIHAD brings together a range of actors to discuss best practices in the realm of humanitarian assistance and development. **With a theme of 'Aid and COVID-19, A Focus on Africa'**, the conference explored the impacts of COVID-19 in complex context around Africa. **IOM's Regional Directors for the East and Horn of Africa and Southern Africa** participated in two sessions at the conference, **speaking on the impact of conflicts and humanitarian crises, and population growth, urbanization, education and employment dynamics on the continent**.

IOM's appeal for the MENA region for 2020
91,360,418 USD

Funding contributions to COVID-19 at close of 2020:
78,572,662
including **5.6 million USD** reprogrammed funding.



IOM National Response Plans related to COVID-19 can also be found at [IOM's Crisis Response Site](#)

Stories from the Field

Colourful prints and bright ideas: The story of Vida Tabo, a Ghanaian migrant in Libya

Vida Tabo is a 30-year-old mother of two who runs an in-house tailor shop in one of the mostly migrant-populated neighbourhoods of Tripoli. In a time where many migrants are struggling with unemployment and loss of livelihoods due to the COVID-19 pandemic, Vida has managed to adapt and survive, albeit not in the same capacity. Once the owner of a flourishing business, now Vida must contend with barely enough customers to keep the shop running.

New data [published](#) by IOM Libya's DTM, estimates the number of migrants in Libya at the end of 2020 has dropped to around 571,000 due to loss of livelihoods, unemployment and mobility restrictions. This decrease of more than 12 per cent compared to the [beginning](#) of the COVID-19 pandemic has seen more than 80,000 migrants leave Libya in the past year, mostly to neighbouring countries.

Vida left her home country of Ghana in 2014 to be reunited with her husband in Libya. To support her husband and family back home, Vida bought a sewing machine and launched her home-based business, first by offering alterations and then by making garments.

As the business began to thrive, Vida's family in Ghana started sending her a variety of fabrics covered in bright, bold patterns and colourful Ghanaian prints. With the extra fabric, Vida started to produce more clothing and incorporate African designs into her work. These exciting new clothes brought her even more customers and Vida was able to buy several more sewing machines and train three assistants from the migrant community to support her.

"Nothing was able to stop my business in those days", she said, "not even the continuation of conflicts in Libya. I had to work despite the wars and the situation in the country, so I continued, because I have eight (8) family members to support, and they depend on me."

When the pandemic struck, everything changed for Vida and her tailoring shop. As the number of customers suddenly dropped, she could no longer afford to keep her three assistants. By the end of 2020, Vida was left with only one assistant to continue helping her.

"Because of COVID-19, we are not able to go to church and people are not coming to the shop a lot," she said.



Vida holds many titles: a mother of two, a wife, and a business owner. She hopes to save enough money to return to Ghana © IOM Libya



Talking to her aspirations Vida notes, "I want to open a bigger tailor shop to continue supporting my family with the business." ©IOM Libya

"Everyone is afraid of going out and I'm not making much money now. I'm making just enough to pay the rent and buy some food."

Despite the pandemic affecting her life and her business, Vida managed to bring back customers with a bright idea. She decided to make COVID-19 preventative cloth masks using the colourful Ghanaian fabric she had in the store. They were fashionable, as well as more sustainable, as they could be washed and re-worn.

"I had to continue supporting my family, so I had to do something. That's when I started making the masks," she said.

Ghana, with more than 25,700 migrants in Libya, represents the fourth largest country of origin for sub-Saharan migrants in the country. Although their numbers have also decreased by about 27 per cent compared to January-February 2020 when there were 35,267 Ghanaians living in the country ([DTM Migrant Report round 29](#)).

"After some discussion with my community, I went to the market and bought different textiles to start the work," Vida said. "Making protective masks was totally new for me. It was never something I could imagine making before."

"Since starting the work, I have made four different models. I did not like the ones available in the market and many were inadequate for what most of the community needed. We have managed to make so many masks that we even started distributing them to the Ghanaian community in church and to people in need who couldn't afford to buy them from the shops."

Vida came into contact with IOM Libya in late 2020, when she received food assistance during the week leading to the celebration of International Migrants Day. Given her business background, IOM asked her to run a mask making workshop for the day for a group of women from different migrant communities. During the workshop, Vida shared her experience of incorporating African designs and textiles from Ghana into her business and how she was overcoming the challenges impacting her work, such as conflict and the pandemic.

While Vida's ingenuity has kept her business afloat, she dreams of a time when she can collect enough money to go back to Ghana and continue making fashionable clothes.

"I want to open a bigger tailor shop, to make more clothes and support my family with the business," she said.

As the world marked the first anniversary since COVID-19 was declared a pandemic in March 2020, more cases and deaths continued to be reported globally, with **new waves of the outbreak experienced in various parts of the world**. In addition to the existing preventive measures, **more focus has been placed on vaccination rollout**. In the MENA region, a total of **4,613,473 cases** of COVID-19 have been reported, out of which, **76,825 cases have provide fatal**, while 4,093,973 are considered recovered. This represents an increase of **16.3 per cent (648,151)** and **10.2 per cent (7,843)** in the number of **cases and deaths reported respectively** during the reporting period. The **regional case fatality ratio (CFR) remains stable at 1.7 per cent** while the recovery rate is at 90.3 per cent. **The top three (3) countries in terms of mortality are: Iraq (14,128), Egypt (11,720), and Morocco (8,786)**, which account for 45 per cent of all COVID-19-related mortalities in the region. The **highest CFRs continue to be reported in countries affected by conflict and instability**, including Yemen (21.6 per cent), Sudan (6.8 per cent), and Syria (6.7 per cent). Despite having the highest CFR in the MENA region, **Yemen reported a significant drop in its CFR during the reporting period**. The identification of **new strains of COVID-19 have also been reported** throughout the region with seven (7) countries reporting variants.

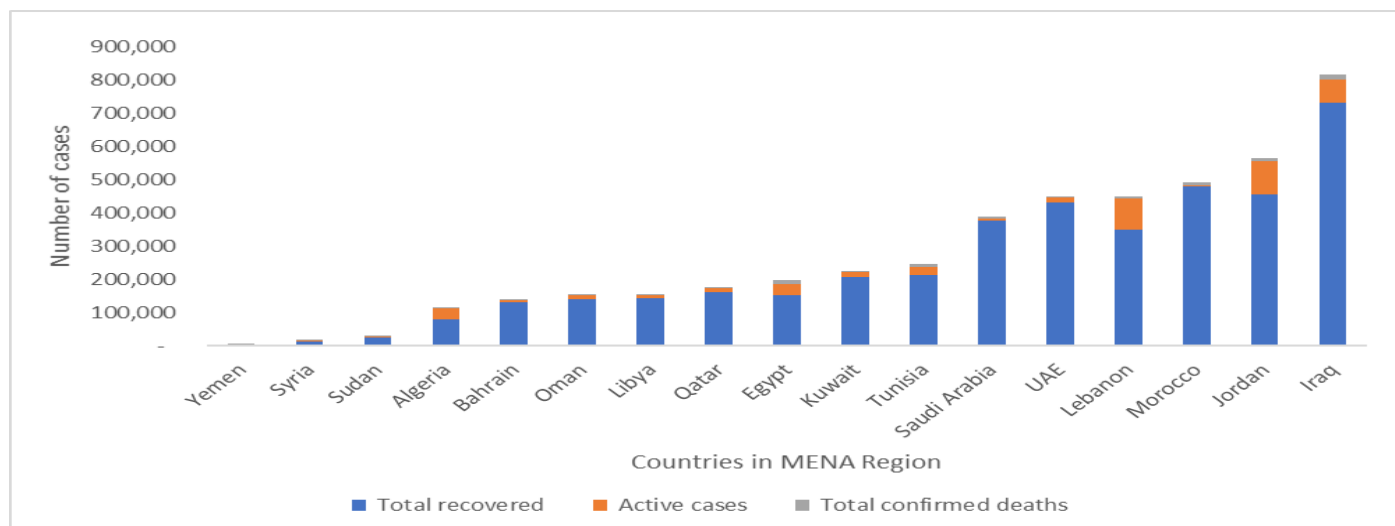


Figure 1: COVID-19 situation in MENA Countries as of 25 March 2020 ©WHO Situational Reports

The COVID-19 pandemic continues to significantly impact regional mobility in the form of various travel bans and mobility restrictions. **Some changes have been recorded in the operational status of international Points of Entry (PoEs)** in the MENA region during the reporting period, with a **gradual reopening of PoEs**. To date, according to IOM's Tracking Mobility Impact, around **61 per cent of monitored international airports are fully operational**, sixteen (16) per cent are partially operational and 22 per cent remain fully closed. Around 26 per cent of the 106 monitored land border crossing points remain fully closed and 16 per cent are partially operational, while there are **55 land border crossing points that are now classified as fully operational**. Out of 50 monitored blue border crossing points in the region, 11 of them are fully closed and 13 are partially operational, while **twenty-five (25) blue border crossing points are now fully operational for passengers**.¹

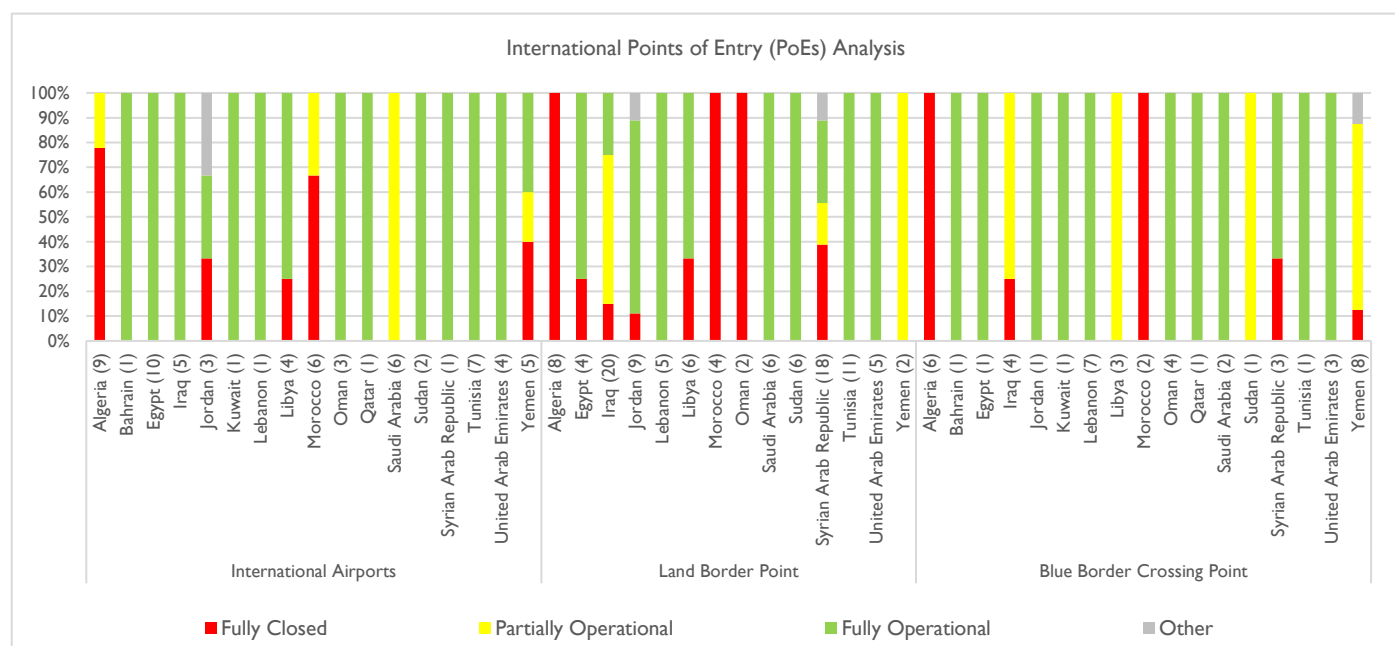


Figure 2: Operational Status of PoEs across the MENA Region ©IOM Tracking Mobility Impacts

¹ Several PoEs had unknown status during the reporting period. The Unknown category for PoEs include one (1) per cent for airports three (3) per cent for land borders and one (1) for blue borders.

Response

COORDINATION AND PARTNERSHIPS

IOM in **Kuwait**, in cooperation with the Public Authority for Manpower (PAM), launched a series of psycho-social support (PSS) workshops throughout the month of March 2020 to celebrate International Women's Day. The workshops target women residing in the Government of Kuwait's shelter for female foreign workers. This activity falls under a joint agreement between IOM and Ooredoo, a telecommunications company in Kuwait, which allows customers and members of the 'Nojoom' program to donate points to IOM to support community cohesion activities and migrant workers. In addition to the series of PSS workshops, and considering the ongoing COVID-19 pandemic, IOM also provided 200 personal hygiene and protective kits to around 100 women residing in the shelter as a preventive measure against the virus. Separately, IOM launches a three (3)-day workshop targeting media professionals on responsible reporting in partnership with the Embassy of the Netherlands in Kuwait and in cooperation with the Ministry of Information. The workshop aims to contribute to the empowerment of media professionals as they report on migrant communities, especially vulnerable migrants, through addressing the ways they are portrayed in the media.

IOM in **Morocco** participated in several regional meetings with the *Groupe de travail de protection* (working group on protection). During the meetings, IOM shared information on the COVID-19 situation in Morocco and contributed to the coordination effort among non-governmental organizations (NGOs). IOM and the United Nations High Commissioner for Refugees (UNHCR) also led the *groupe de travail sur la migration et l'asile* (working group on migration and asylum). The working group meetings aim to coordinate UN efforts on migration and asylum management, including topics related to COVID-19.

TRACKING MOBILITY IMPACT

In **Iraq**, IOM, through its Displacement Tracking Matrix (DTM), collected information on mobility restrictions within



IOM staff during hygiene promotion at a displacement camp in Ta'iz, Yemen © IOM Yemen

Iraq, as well as at international points of entry (PoEs). These restrictions include: limitations on mobility across governorates, limitations on commercial and trade activity, curfews, changes in government and residency office operating hours, and legal regulations. IOM's DTM assessed 32 locations, including PoEs along land borders and maritime boundaries. Five (5) were reported as closed, 12 partially open, four (4) open, and 11 open only for commercial traffic. IOM also reported on domestic movement restrictions. From the data collected, IOM's DTM produced one (1) [Iraq Mobility Restriction Report](#) during the reporting period, presenting an overview of mobility restrictions for the monitored PoEs as well as across Iraq in general.

RISK COMMUNICATION AND COMMUNITY ENGAGEMENT (RCCE)

In **Yemen**, IOM's hygiene promotion teams conducted 1,512 hygiene awareness raising sessions, inclusive of COVID-19 prevention components, benefitting 7,110 internally displaced persons (IDPs). IOM's migrant protection team also provided 3,383 migrants with COVID-19 prevention awareness messaging, alongside information on other topics relevant for stranded migrants in Yemen, such as IOM's Voluntary Humanitarian Return (VHR) assistance.

In **Libya**, IOM's medical team conducted outreach campaigns and awareness raising sessions in Sabha, Ubari, Tripoli, Zwara, Bani Walid, Misrata and Benghazi districts. A total of 9,924 migrants participated in the sessions, improving their awareness and knowledge of COVID-19 precautionary measures and the responsible behavior when confronted with a suspected COVID-19 infection. IOM also conducted hygiene promotion and COVID-19 awareness sessions at Triq al Sikka, Alsaheh, Shara Azzawya and Azzawya Abu Issa migrant detention centres (DCs) for 1,045 migrants and 28 DC staff. During the sessions, wall posters were fixed at strategic locations inside the DCs, while personal protective equipment (PPE) and COVID-19 awareness leaflets were distributed to the participants. IOM Libya's mental health and psycho-social support (MHPSS) team also organized an art-based psycho social workshop at an IOM managed center in Tripoli for eight (8) women from Sudan. IOM's MHPSS team also accompanied mobile clinic to different urban locations in Tajoura and Souq Al Jumaa, where the team organized several MHPSS awareness raising sessions on coping with stress during COVID-19 and distributed



IOM staff during hygiene promotion at a displacement camp in Ta'iz, Yemen © IOM Yemen

MHPSS flyers to 70 male migrants. In coordination with the local NGO Women's Union, IOM also celebrated International Women's Day at the public theatre in Sabha city. IOM teams provided COVID-19 awareness information and distributed awareness raising flyers to more than 100 migrant, IDP and host community women and children. Strict COVID-19 health protocol was applied during the event.

IOM in **Iraq** conducted 575 COVID-19 sensitization sessions, reaching 4,665 people in Erbil, Dohuk, Ninewa, Kirkuk, Anbar, and Baghdad governorates. Information, education and communication (IEC) materials were also distributed across all six (6) governorates to adults and children in IDP camps, schools, healthcare centers, and through door-to-door visits. These materials were produced to increase community awareness about COVID-19 protective measures, signs and symptoms, and health services provided at primary healthcare centers, camp clinics, and hospitals. IOM also distributed 5,100 COVID-19 winterization kits for children, which including COVID-19 activity learning books across several sites, through the camp coordination and camp management (CCCM) team. Concurrently, IOM distributed 2,082 IEC materials through the CCCM teams in several locations. IOM conducted hygiene promotion sessions in Berseve Camp, Dohuk Governorate, to raise awareness on COVID-19 hygiene precautions. The session targeted ten (10) male and ten (10) female community members, with an additional 3,900 COVID-19 IEC materials distributed. IOM continued providing COVID-19 awareness raising sessions ahead of activities and field surveys across the country, focused on personal health and PSS, reaching more than 800 people through over 70 activities. These took place in in camp and non-camp settings in: Diyala, Dohuk, Kirkuk, Najaf and Ninewa governorates.

In **Algeria**, IOM continues to implement the Facebook campaign "COVID-19: Qu'est ce qu'il faut savoir?" (COVID-19: What should one know), which aims to inform migrants on COVID-19 risks and prevention measures while tacking misinformation.

DISEASE SURVEILLANCE

In **Iraq**, IOM's community-based surveillance (CBS) teams continued field activities across four (4) IDP camps in Anbar, Dohuk, Erbil, and Ninewa governorates. The teams have conducted and completed community mapping exercises and a knowledge, attitudes and practices (KAP) survey in three (3) of the camps. They also conducted active case identification processes for COVID-19 across all zones within the three (3) camps. Repeat active case identification activities continue in targeted zones of the IDP camps where there are more residents with chronic health conditions that put them at risk for complications following infection with COVID-19. Active case finding activities have successfully identified symptomatic individuals and referred them for evaluation and support. The KAP survey data analysis is ongoing and will aim to inform vaccine hesitancy program planning. IOM's CBS teams work closely with health facilities and RCCE teams to ensure linkages are in place for IOM supported health activities. The CBS teams aim to further support the surveillance of, and response to, COVID-19 in camp settings. Comprehensive analysis of screening data on COVID-19 transmission in targeted governorates is ongoing to improve health data quality and the Department of Health's (DoH) capacity to use more efficient online reporting systems.

POINTS OF ENTRY (POE)

IOM in **Libya** supported the National Centre for Disease Control (NCDC) staff at Misrata Airport, Ras Jedir and Wazin PoEs by providing medical check-ups to 87,791 passengers returning to Libya. IOM also provided Libyan border security and management staff with PPEs to strengthen the COVID-19 response capacity at PoEs, including land crossings and seaports. The PPEs consisted of 80,000 gloves, 50,000 surgical masks, 500 N95 masks and more than 150 bottles of hand sanitizer.

IOM in **Iraq** continued to support the Erbil International Airport to establish a COVID-19 testing laboratory, which will be the first at a PoE in Iraq. IOM is finalizing guidelines, standard operating procedures (SOPs), and RCCE materials for COVID-19 testing at the airport. With IOM's support, iMMAP has designed a data management system for all arriving travellers. Using QR and barcode technology, travellers will be able to track their samples and see their results as soon as they are generated. The laboratory and testing procedures will be officially launched in the coming weeks.

NATIONAL LABORATORY SYSTEMS

In **Yemen**, IOM provided one (1) GeneXpert testing machine and supporting cartridges to Al Makha Hospital's laboratory. The GeneXpert machine was installed in the existing COVID-19 treatment and isolation centre to ensure that suspected cases can obtain accurate test results in a timely fashion. IOM trained ten (10) laboratory staff from the hospital and the COVID-19 isolation and treatment centre on the use of the machine. Out of the ten (10) laboratory staff trained, four (4) will be operating from the COVID-19 isolation and treatment centre. Four samples from suspected cases were tested in the reporting period. The installation of the machine was covered in local media and can be found [here](#).

INFECTION PREVENTION CONTROL (IPC)

In **Yemen**, IOM collected 524 meters cubed (m3) of waste as part of IPC measures. This was primarily solid waste from households, which was transported to a landfill site. More than 32,000 people benefitted from the waste disposal activity, which reduced infection risks.

In **Libya**, IOM conducted a three (3)-day training workshop



In celebration of International Women's Day, IOM launched psycho-social support workshops throughout March for residents at the Government of Kuwait's shelter for female foreign workers. © IOM Kuwait



IOM organized a charter flight to Bangladesh from Bnina 2, Libya as part its voluntary humanitarian returns activities ©IOM Yemen

on first aid and IPC for 17 staff working in four (4) migrant detention centers (DCs) in the eastern part of the country. IOM also conducted fumigation, disinfection and thorough cleaning interventions in seven (7) disembarkation points (DPs) along Libya's northern coastline, as well as in 12 migrant DCs across Libya as part of the campaign to combat COVID-19 and other infectious diseases.

IOM in **Iraq** provided ongoing coaching and supervision to supported health facilities and DOH staff to monitor and respond to needs. COVID-19 screening and triage processes continued at IDP health clinics prior to patient consultations. During the reporting period, 106,054 beneficiaries were screened at supported facilities across 26 sites in Anbar, Baghdad, Erbil, Dohuk, Kirkuk, and Ninewa governorates. IOM Iraq continued to support the DOH through the provision of PPE, IPC materials, and essential supplies. Assessments are ongoing to determine how to meet ongoing PPE and IPC gaps in partnership with DOH.

CAMP COORDINATION AND CAMP MANAGEMENT (CCCM)

In **Iraq**, IOM supplied and installed 23 handwashing stations across seven (7) informal sites in Baghdad Governorate. In Sinjar, Ninewa Governorate, IOM provided awareness raising sessions on a range of topics focused on identifying COVID-19 and its symptom, protection methods, and advice on how to maintain the installed handwashing stations. In Baghdad, CCCM team coordinated with communications with communities' teams to conduct COVID-19 awareness raising sessions and distribute COVID-19 materials.

IOM in **Tunisia** is continuing its awareness campaigns, hygiene promotion activities and direct socio-economic assistance to 232 migrants, accommodated at IOM two shelters in the governorate of Medenine. IOM has organized four (4) COVID-19 awareness sessions with flyer and poster distributions on preventive measures against COVID-19, the distribution of a total of 232 food vouchers as well twice (2) a week medical consultations and health assessments to all migrants accommodated in the two IOM

shelters. IOM sub office in Zarsis assisted ten (10) migrants through the Assisted Voluntary Return and Reintegration (AVRR) programme and conducted 20 PCR tests.

CASE MANAGEMENT AND CONTINUATION OF SERVICES

In **Yemen**, IOM is providing medical supplies and human resource support to 17 health facilities across Al Jawf, Aden, Sada'a, Al Baydah, Amanat Al Asimah, Lahj, Marib, and Shabwah governorates. Through six (6) mobile health teams, IOM is also providing access to emergency health assistance in displacement sites and along migratory routes in Aden, Lahj and Marib governorates. During the reporting period, nearly 22,790 people received access to health services.

IOM in **Libya** handed over medical equipment and furniture to Alkish Clinic, a public health facility located at Al Kish area, Benghazi, that provides medical services for the residents of the surrounding areas. According to 2019 data, 669,667 people received medical services at this clinic of whom 15 per cent were migrants. IOM Libya also supported Alfewehat and Al Jadida polyclinics in Benghazi with medical equipment and furniture. Both clinics provide health care services for residents and migrants free of charge. The equipment is essential for increasing the capacity of both clinics.

In **Lebanon**, IOM continued conducting medical campuses targeting migrant workers from Bangladesh and Ethiopia.

PROTECTION

In **Morocco**, IOM and its partners continue distributing non-food items (NFIs) and food items (FI) to vulnerable persons. Items distributed included hygiene kits, blankets and meal portions. IOM also provided PSS for beneficiaries through phone call consultations, individual and group activities. These services covered several regions. Through its membership of the "GTP" platforms in the regions of Tanger Tetooun al-Hoceima, the Oriental and Casablanca-Settat, IOM is ensuring that its partners are coordinating their activities with NGO's and local authorities to ensure complementarity of actions. This also helps in identifying other vulnerable persons and providing them with the necessary assistance.

IOM in **Tunisia**, as part of its Assisted Voluntary Return (AVR) programme, received 85 migrants' requests to return from Tunisia to countries of origin. IOM provided assistance to cover accommodation and food costs during their period of quarantine and has ensured individual online follow up of their cases. IOM Tunisia provided resettlement services to 14 cases including case processing and health assessments and travel health assistance. IOM provided medical assistance to 226 beneficiaries to ensure the continuity of PSS and medical assistance to vulnerable migrants. This assistance included coverage of medical costs for 212 beneficiaries, and health counselling and psychological support to 100 migrants. IOM sub-office in Sfax also provided medical assistance to 26 migrants. IOM sub-office in Sfax has supported local authorities and assisted 126 rescued at sea migrants with the provision of immediate assistance, such as the distribution of hygiene kits, clothes, the provision of medical assistance, including counselling as well as the provision of hot meals. In addition, IOM sub office in Sfax has provided telephone counselling to 58 migrants. IOM also provided 34 legal consultations to the most vulnerable beneficiaries, including women, through mediation with landlords to prevent expulsions, mediation with employee to recover unpaid salary and court procedures to issues official documents.

In **Libya**, IOM conducted a full day training in Tripoli on MHPSS, in response to the psycho-social impacts of the COVID-19 pandemic. The training targeted 19 healthcare and frontline professionals, who are working closely with the affected migrant and local population. The training focused on MHPSS approaches and responses related to the COVID-19 pandemic, provision of psychological first aid adapted to COVID-19, anti-stigmatization and self-care. Trainees included medical doctors, nurses, community health workers, psycho-social workers from different NGOs, and psycho-social support workers from the National Centre for Disease Control (NCDC). IOM Libya's MHPSS helpline received 33 calls (24 men, 9 women) from Tripoli, Jadu and Zwara during the reporting period. Migrants from Chad, Egypt, Eritrea, Liberia, Mali, Nigeria, Senegal, South Sudan, Sudan and the Gambia were provided

with remote counselling and PSS services through the helpline.

In **Algeria**, IOM provided Assisted Voluntary Return and Reintegration (AVRR) assistance to 87 migrants who were stranded in Algeria due to ongoing international border closure. This included 71 Beninese, six (6) Senegalese, four (4) Zimbabwean, two (2) Nigerian, one (1) Ghanaian, one (1) Gambian, one (1) Congolese and one (1) Ugandan. Seven (7) migrants, all women in situation of vulnerability, were assisted with protection screening and counselling, three (3) women were assisted with food baskets; one (1) man, eleven (11) women and four (4) children in situations of vulnerability were assisted with shelter, one (1) woman was provided with medical assistance.

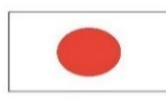
ADDRESSING SOCIO-ECONOMIC NEEDS

IOM in **Iraq** provided business support packages, part of its individual livelihoods' assistance, to 81 individuals during this reporting period. IOM is also conducting cash for work (CfW) activities for 681 beneficiaries. IOM selected 42 small and medium enterprises (SMEs) to receive SME grants. In addition, another 281 SMEs that previously received an enterprise development fund (EDF) grant remain under contract and are working towards achieve their milestones to expand their business and hire additional employees. With each milestone complete, a tranche of the EDF grant gets disbursed.

IOM in **Tunisia**, in partnership with local authorities, provided direct assistance through vouchers distribution in the cities of Zarsis, Sousse and Sfax to 1,366 migrants in vulnerable situations. IOM also conducted awareness raising sessions for beneficiaries of this direct assistance with key messages on COVID-19 precautions and preventive measures.

In **Algeria**, 230 migrants (104 men, 56 women and 70 children) were provided with dignity kits and food baskets to support individual coping capacities in the face of decreasing livelihood opportunities during COVID-19. The content of the dignity kits and food baskets are designed with consideration to gender and age.

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